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## \*BIBDATASHEET\*

CONFIRMATION NO. 7248

Bib Data Sheet

SERIAL NUMBER 09/994,482	FILING DATE 11/26/2001  RULE	CLASS 725	GROUP ART UNIT 2611	ATTORNEY DOCKET NO. 16523.311901	
<b>APPLICANTS</b>  Hua Harry Li, Palo Alto, CA;  Bill Huang, Alameda, CA;  ** CONTINUING DATA ***** This appln claims benefit of 60/332,465 11/16/2001  ** FOREIGN APPLICATIONS *****  IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/02/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		STATE OR COUNTRY CA	SHEETS DRAWING 12	TOTAL CLAIMS 53	INDEPENDENT CLAIMS 5
<b>ADDRESS</b> 32662 FELIX L. FISCHER, ATTORNEY AT LAW 1607 MISSION DRIVE SUITE 204 SOLVANG, CA 93463					
<b>TITLE</b> Time-shifted television over IP network system					
FILING FEE  RECEIVED 1890	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 7248

<b>SERIAL NUMBER</b> 09/994,482	<b>FILING DATE</b> 11/26/2001 <b>RULE</b>	<b>CLASS</b> 386	<b>GROUP ART UNIT</b> 2615	<b>ATTORNEY DOCKET NO.</b> 16523.311901	
<b>APPLICANTS</b> Hua Harry Li, Palo Alto, CA; Bill Huang, Alameda, CA;					
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/332,465 11/16/2001 <u>DS</u>					
<b>** FOREIGN APPLICATIONS *****</b> <u>None DS</u>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/02/2002</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Dominic Sabatelli</u> <u>DS</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 53	<b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> 25696					
<b>TITLE</b> Time-shifted television over IP network system					
<b>FILING FEE RECEIVED</b> 1632	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		